Wisconsin Department of Regulation & Licensing Mail To: P.O. Box 8935 1400 E. Washington Avenue

Madison, WI 53708-8935

(608) 266-2264 **(608) 266-7482** FAX #: Phone #:

Madison, WI 53703

E-Mail: web@drl.state.wi.us Website: http://drl.wi.gov

DIVISION OF ENFORCEMENT

COMPLAINT FORM

COMPLETION OF THIS FORM IS VOLUNTARY

| PLEASE PRINT OR TYPE - NO |) HAI | NDWRITING – PRESS FIRMLY |
|---------------------------------|-------|--------------------------|
| Your Name (First, Middle, Last) | | Complaint Against |

| Address City State Zip County Area Code Home Phone # () Date of Birth Area Code Work Phone # () PLEASE NOTE: SEE PAGE 3 FOR IMPORTANT INFORMATION AND A LIST OF THE PROFESSIONS, OCCUPACTIVITIES AND BUSINESSES REGULATED BY THE DEPARTMENT OR BOARDS ATTACHED TO THE PROFESSIONS ACTIVITIES AND BUSINESSES REGULATED BY THE DEPARTMENT OR BOARDS ATTACHED TO THE PROFESSIONS ACTIVITIES AND BUSINESSES REGULATED BY THE DEPARTMENT OR BOARDS ATTACHED TO THE PROFESSIONS ACTIVITIES AND BUSINESSES REGULATED BY THE DEPARTMENT OR BOARDS ATTACHED TO THE PROFESSIONS ACTIVITIES AND BUSINESSES REGULATED BY THE DEPARTMENT OR BOARDS ATTACHED TO THE PROFESSIONS ACTIVITIES AND BUSINESSES REGULATED BY THE DEPARTMENT OR BOARDS ATTACHED TO THE PROFESSIONS ACTIVITIES AND BUSINESSES REGULATED BY THE DEPARTMENT OR BOARDS ATTACHED TO THE PROFESSIONS ACTIVITIES AND BUSINESSES REGULATED BY THE DEPARTMENT OR BOARDS ATTACHED TO THE PROFESSIONS ACTIVITIES AND BUSINESSES REGULATED BY THE DEPARTMENT OR BOARDS ATTACHED TO THE PROFESSIONS ACTIVITIES AND BUSINESSES REGULATED BY THE DEPARTMENT OR BOARDS ATTACHED TO THE PROFESSIONS ACTIVITIES AND BUSINESSES REGULATED BY THE DEPARTMENT OR BOARDS ATTACHED TO THE PROFESSIONS ACTIVITIES AND BUSINESSES REGULATED BY THE DEPARTMENT OR BOARDS ATTACHED TO THE PROFESSIONS ACTIVITIES AND BUSINESSES | Zip |
|---|-----------|
| County Area Code Home Phone # () Date of Birth Area Code Work Phone # () PLEASE NOTE: SEE PAGE 3 FOR IMPORTANT INFORMATION AND A LIST OF THE PROFESSIONS, OCCUPA ACTIVITIES AND BUSINESSES REGULATED BY THE DEPARTMENT OR BOARDS ATTACHED? 1. When did the incident occur? If you do not know the exact date, make as close an estimate as possible. 2. Did the incident occur in a facility, private office, home, etc.? Provide specific names and addresses of each place involved. | Zip |
| Date of Birth Area Code Work Phone # () PLEASE NOTE: SEE PAGE 3 FOR IMPORTANT INFORMATION AND A LIST OF THE PROFESSIONS, OCCUPA ACTIVITIES AND BUSINESSES REGULATED BY THE DEPARTMENT OR BOARDS ATTACHED? 1. When did the incident occur? If you do not know the exact date, make as close an estimate as possible. 2. Did the incident occur in a facility, private office, home, etc.? Provide specific names and addresses of each place involved. | Zip |
| Date of Birth Area Code Work Phone # () PLEASE NOTE: SEE PAGE 3 FOR IMPORTANT INFORMATION AND A LIST OF THE PROFESSIONS, OCCUPA ACTIVITIES AND BUSINESSES REGULATED BY THE DEPARTMENT OR BOARDS ATTACHED. 1. When did the incident occur? If you do not know the exact date, make as close an estimate as possible. 2. Did the incident occur in a facility, private office, home, etc.? Provide specific names and addresses of each place involved. | |
| 1. When did the incident occur? If you do not know the exact date, make as close an estimate as possible. 2. Did the incident occur in a facility, private office, home, etc.? Provide specific names and addresses of each place involved. | |
| 1. When did the incident occur? If you do not know the exact date, make as close an estimate as possible. 2. Did the incident occur in a facility, private office, home, etc.? Provide specific names and addresses of each place involved. | TIONS. |
| Did the incident occur in a facility, private office, home, etc.? Provide specific names and addresses of each place involved. | |
| Did the incident occur in a facility, private office, home, etc.? Provide specific names and addresses of each place involved. | |
| Did the incident occur in a facility, private office, home, etc.? Provide specific names and addresses of each place involved. | |
| | |
| | |
| | |
| | ed in the |
| | |
| | |
| 3. Have you spoken to the person about your complaint?YesNo. If yes, what was his/her response? | |
| | |
| | |
| | |
| | |
| 4. Who else has information related to this incident? Provide names, addresses, and phone numbers for those persons. | |
| | |
| | |
| | |
| | |
| | |
| | |

[PLEASE BE SURE TO SIGN YOUR NAME ON THIS FORM AND DATE IT]

#102 (Rev. 5/05) Sec. 440.03, Stats.

Wisconsin Department of Regulation & Licensing

| 5. | Describe the incident you are complaining about. Include as much specific information as possible. ATTACH COPIES OF ANY DOCUMENTS RELEVANT TO THE INCIDENT. (NOTE: IT IS VERY IMPORTANT TO KEEP ALL MATERIA RELATED TO THIS COMPLAINT SUCH AS BILLINGS, PERSONAL NOTES, PILL BOTTLES OR OTHER MATERIALS). |
|----|--|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| SI | NATURE (First, Middle, Last) DATE FORM SIGNED |

Wisconsin Department of Regulation & Licensing

GENERAL INFORMATION

Staff in the Division of Enforcement of the Wisconsin Department of Regulation and Licensing investigate, and when appropriate, prosecute complaints against persons, organizations and business establishments regulated by the department and the regulatory boards attached to it. (A list of the groups regulated appears below). The boards and department establish and enforce standards of professional conduct for licensed persons and businesses and ensure that other persons are not practicing those occupations or professions and operating businesses unless licensed. The department and boards generally have the authority to reprimand a licensee, suspend or revoke the license of a licensee, limit the licensee's license or dismiss the complaint. Some boards can make additional determinations. The department and boards do not have the authority to award monetary damages or compel corrective actions, as these are primarily court functions.

This form is provided as a convenient means to submit the facts necessary to initiate an investigation. Your complaint will be reviewed to determine whether there appears to be a violation of the law or rules enforced by the appropriate board or the department. If the matter is investigated, it is likely that all persons with information about the case, including the person about whom you are complaining, will be contacted. Once the investigation is complete, a decision will be made as to an appropriate course of action to take. The case may be closed or formal disciplinary action may be commenced against the person about whom you are complaining. If the latter action is taken, there will likely be a hearing before either the relevant board or an administrative law judge. In any event, both the person making the complaint and the person against whom the complaint is made will be advised of the action taken in the case. Under Wisconsin's Open Records Law (Wis. Stats., Ch. 19), complaints will generally be available for review on request from a member of the public after board or agency action is completed.

Sec. 440.042(2), Stats., provides: "Any person who in good faith testifies before the department or any examining board, affiliated credentialing board or board in the department or otherwise provides the department or any examining board, affiliated credentialing board or board in the department with advice or information on a matter relating to the regulation of a person holding a credential is immune from civil liability for his or her acts or omissions in testifying or otherwise providing such advice or information. The good faith of any person specified in this subsection shall be presumed in any civil action and an allegation that such a person has not acted in good faith must be proven by clear and convincing evidence."

If you have any questions about this form or the procedure that will take place, please contact the department staff at (608) 266-7482.

The following professions, occupations, activities and businesses are regulated by the boards and department:

Accountants-Certified Public Accountants and Firms

Acupuncturists

Aestheticians and Aesthetician Establishments

Appraisers-Licensed-General and Residential Real Estate

Architects

Architectural and Engineering Corporations

Athlete Agents Athletic Trainers

Auctioneers and Auction Companies

Audiologists

Barbering and Cosmetology Establishments Barbering and Cosmetology Managers Barbering and Cosmetologist Practitioners

Boxing Clubs and Exhibitions Cemetery Preneed Sellers

Cemetery Salespersons and Authorities

Charitable Organizations

Chiropractors
Dental Hygienists

Dentists

Designers of Engineering Systems

Dietitians

Drug Distributors and Manufacturers

Electrologists and Electrology Establishments

Engineers-Professional Fund Raising Counsel Fund Raisers-Professional Funeral Directors

Funeral Establishments

Geologists-Professional and Geology Firms

Hearing Aid Instrument Specialists

Home Inspectors

Hydrologists-Professional and Hydrology Firms

Interior Designers Land Surveyors Landscape Architects

Manicurists and Manicuring Establishments

Marriage and Family Therapists
Massage Therapists and Body Workers
Music, Art and Dance Therapists
Nurses-Advanced Practice
Nurses-Licensed Practical

Nurse-Midwives Nurses-Registered

Nursing Home Administrator

Occupational Therapists and Occupational Therapy Assistants

Optometrists Pharmacies Pharmacists Physical Therapists

Physicians (doctors of medicine and osteopathy)

Physician's Assistants

Podiatrists

Private Detectives and Agencies Private Practice School Psychologists

Private Security Persons Professional Counselors

Psychologists

Real Estate Brokers, Corporations and Partnerships

Real Estate Salespersons Respiratory Care Practitioners

Schools and Instructors of Barbering, Cosmetology,

Aesthetics, Electrology and Manicuring

Social Workers Soil Scientists

Speech Language Pathologists Time-Share Salespersons

Veterinarians

Veterinary Technicians